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Bib Data Sheet

CONFIRMATION NO. 4724

SERIAL NUMBER 10/018,546	FILING DATE 06/17/2002 RULE	CLASS 436	GROUP ART UNIT 1641	ATTORNEY DOCKET NO. POLYMER
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APPLICANTS

☒ Joel Mitchen, Pleasant Prairie, WI;
☒ Sunil Anaokar, Indianapolis, IN;
☒ John J. Pasqua, Tucker, GA;
☒ Michele J. Crispino, Indianapolis, IN;
☒ Terence M. McCaffrey, Hollywood, FL;
☒ James M. Connolly, Indianapolis, IN;
☒ Hyeon-Sook Lee Zeng, Indianapolis, IN;

**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US00/16816 06/16/2000

**** FOREIGN APPLICATIONS *******

UNITED STATES OF AMERICA 60/139983 06/18/1999

**** SMALL ENTITY ****

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowed Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY WI	SHEETS DRAWING 6	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
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ADDRESS

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 111 Monument Circle Suite 4600
 PO Box 44924
 Indianapolis, IN 46244-0924

TITLE

Apparatus and method for determining substances contained in a body fluid

FILING FEE RECEIVED 485	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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Bib Data Sheet

CONFIRMATION NO. 4724

SERIAL NUMBER 10/018,546	FILING OR 371(c) DATE 06/17/2002 RULE	CLASS 435	GROUP ART UNIT 1654	ATTORNEY DOCKET NO. POLYMER
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APPLICANTS

Joel Mitchen, Pleasant Prairie, WI;
 Sunil Anaokar, Indianapolis, IN;
 John J. Pasqua, Tucker, GA;
 Michele J. Crispino, Indianapolis, IN;
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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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TITLE

APPARATUS AND METHOD FOR DETERMINING SUBSTANCES CONTAINED IN A BODY FLUID

FILING FEE RECEIVED 485	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit